Substitute for form 1449/PTO				Complete if Known		
				Application Number 10/584,399		
INFORMATION DISCLOSURE				Filing Date	June 4, 2007	
STATEMENT BY APPLICANT (Use as many sheets as necessary)			APPLICANT	First Named Inventor	Kazunari HASEBE 3768 3739	
				Art Unit		
			necessary)	Examiner Name	Not Yet Assigned Della	
heet	1	of	1	Attorney Docket Number	360882016200	

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Examiner Initials*	Cite No.1	Document Number Number-Kind Code ² (if known)	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear
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	4.	JP-06-327763	11-29-1994	Sanyo Electric Works, Ltd.	Translation of Abstract	Γ
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	8.		04-15-2003	Nihon Medix Co., Ltd.	Corresponds to cite no. 9	
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NON PATENT LITERATURE DOCUMENTS					
Examiner Initials	Cite No.1	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published.	T		
	10.	Written Opinion of the International Searching Authority directed to corresponding International Patent Application No. PCT/JP2004/000816.	V		
	11.	International Search Report directed to corresponding International Application No. PCT/JP2004/000816	7		

*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

Examiner			
	/Jaymi Della/	Date	
Signature	/.tavmi nelia/		10/27/2010
	rought Dona	Considered	10/27/2010

¹Applicant's unique citation designation number (optional). ²Applicant is to place a check mark here if English language Translation is attached.